Case 3:07-cv-04684-CRB Document 22-2 Filed 06/27/2008 Page 1 of 18 USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Juan Angel Martinez, Jr.	1	JRT CASE NUMBER 07-4684 CRB(PR)	
DEFENDANT		E OF PROCESS	
James E. Tilton et al		mplaint, summons and	
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETG	C. TO SERVE OR DESCRIPTION	OF PROPERTY TO SEIZE	OR CONDEMN
SERVE Robert A. Horel, Pelican Bay State Prison			
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP	Code)		
P.O. Box 7000, Crescent City, CA 95531-7000	200 PET 0111		
END NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRE	Number	of process to be ith this Form 285	
	SCIVED W	Tur tins Porm 200	
Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison		of parties to be	
C-7-214	served ir	this case	0
P.O. Box 7500	Check fo	r service	<u></u>
Crescent City. CA 95532	on U.S.A	. T	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST	IN EXPEDITING SERVICE (Incl.	de Business and Alternate	dekesses.
All Telephone Numbers, and Estimated Times Available for Service):	,	7~	
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ignature of Attorney other Originator requesting service on behalf of	PLAINTIFF TELEPHONE	NUMBER DATE	
/ 1 / / /	DEFENDANT (415) 522	-2000 1/18	/08
SPACE BELOW FOR USE OF U.S. MARSHAL O	NLY DO NOT WRI	TE BELOW THIS	LINE
acknowledge receipt for the total Total Process District of District to	Signature of Authorized USMS I	Deputy or Clerk	Date
umber of process indicated. Sign only for USM 285 if more			
nan one USM 285 is submitted) No. No. No.			1111
	K. Jul		1/23/
hereby certify and return that I have personally served. have legal evidence	e of service Shave executed as	shown in "Remarks", the pro-	cess described
hereby certify and return that I \square have personally served, \square have legal evidence in the individual, company, corporation, etc., at the address shown above on the one	e of service. have executed as the individual, company, corporat	shown in "Remarks", the proon, etc. shown at the address	cess described inserted below.
hereby certify and return that I have personally served, have legal evidence on the individual, company, corporation, etc., at the address shown above on the on I hereby certify and return that I am unable to locate the individual, company, or	the individual, company, corporat	on, etc. shown at the address	cess described inserted below.
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3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

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Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

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United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Juan Angel Martinez, Jr.	COURT CASE NUMBER	
DEFENDANT	C-07-4684 CRB(PR)	
James E. Tilton et al	TYPE OF PROCESS Complaint, summons and Order	
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR	DESCRIPTION OF PROPERTY TO SEIZE OR COND	EMN
SERVE U. Silva, Pelican Bay State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
•••		
P.O. Box 7000, Crescent City, CA 95531-7000		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be	
	served with this Form 285	
Juan Angel Martinez, Jr. H-93376	Number of parties to be	_
Pelican Bay State Prison C-7-214	served in this case	
P.O. Box 7500	Charle for garning	_
Crescent City, CA 95532	Check for service on U.S.A.	ς:
	H3 6	UNITED
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING All Telephone Numbers, and Estimated Times Available for Service):	SERVICE (Include Business and Alternate Addresses.	
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Signature of Attornovichtor Originator requestion comises on habelf of	TELEPHONE NUMBER DATE	<u></u>
Signature of Attorney other Originator requestive Acris annual for:		
DEFENDANT	(415) 522-2000 1/18/08	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO	NOT WRITE BELOW THIS LINE	,
I acknowledge receipt for the total Total Process District of District to Signature of Au	thorized USMS Deputy or Clerk Date	
number of process indicated. (Sign only for USM 285 if more		
than one USM 285 is submitted) No. No.	og 1/23	102
Thereby certify and return that I have percently certify by legal evidence of require	ave executed, as shown in "Pemerke", the proches descri	had.
I hereby certify and return that I \(\subseteq \text{have personally served} \), \(\subseteq \text{have legal evidence of service} \), on the individual, company, corporation, etc., at the address shown above on the on the individual, co	mpany, corporation, etc. shown at the address inserted be	elow.
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. na	med above (See remarks below)	
Name and title of individual served (if not shown above)		
Traine and time of individual served (y not shown doore)	A person of suitable age and discreti	
	of abode	
Address (complete only different than shown above)	Date Time	a
	Signature of U.S. Marshal or Deputy	
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Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Depos	its Amount owed to U.S. Marshal* or	
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PRINT'S COPIES: 1. CLERK OF THE COURT 2. USMS RECORD	PRIOR EDITIONS MAY BI	E USE

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285

Rev. 12/15/80 Automated 01/00

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Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

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United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

DIAINTEE	COURT CLOSE VIII COOR
PLAINTIFF Juan Angel Martinez, Jr.	COURT CASE NUMBER C-07-4684 CRB(PR)
DEFENDANT	TYPE OF PROCESS
James E. Tilton et al	Complaint, summons and Order
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO	SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE F. Vanderhoofven, Pelican Bay State Prison	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
P.O. Box 7000, Crescent City, CA 95531-7000	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BI	ELOW Number of process to be
	Number of process to be served with this Form 285
Juan Angel Martinez, Jr. H-93376	
Pelican Bay State Prison	Number of parties to be served in this case
C-7-214	
P.O. Box 7500 Crescent City, CA 95532	Check for service
CIENCHI CHV. CA 7.1.112	on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EX	PEDITING SERVICE (Include Business and Alternate Adaresses.
All Telephone Numbers, and Estimated Times Available for Service):	
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Signature of Attorney other Originator requesting spring po behalf of PLA	NTIFF TELEPHONE NUMBER DATE
Defi	ENDANT (415) 522-2000 1/18/08
CDACE DELOW FOR HER OF HE MADEILAL ONLY	
SPACE BELOW FOR USE OF U.S. MARSHAL ONL	
I acknowledge receipt for the total number of process indicated. Total Process District of Origin Serve Sig	nature of Authorized USMS Deputy or Clerk Date
(Sign only for USM 285 if more	K() a -
than one USM 285 is submitted) No. 1 No. 1	123/
hereby certify and return that I \square have personally served , \square have legal evidence of so	rvice have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the in	dividual, company, corporation, etc. shown at the address inserted below
I hereby certify and return that I am unable to locate the individual, company, corpor	ation, etc. named above (See remarks below)
Name and title of individual served (if not shown above)	☐ A person of suitable age and discretion
	then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time
tudios (compete only agree on man shown above)	
	Signature of U.S. Marshal or Deputy
	vance Deposits Amount owed to U.S. Marshal* or
including endeavors)	(Amount of Refund*)
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REMARKS: //OLLAS MAIOD W DAY FOR	
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PRINTS COPILS: 1. CLERK OF THE COURT 2. USMS RECORD	PRIOR EDITIONS MAY BE US
3. NOTICE OF SERVICE	

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,

if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Page 6 of 18

INSTRUCTIONS FOR SERVICE OF PROCESS BY U.S. MARSHAL

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U Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

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PLAINTIFF Juan Angel 1	Martinez Ir			COURT CASE NUM C-07-4684 CRB(
DEFENDANT	<u> </u>			TYPE OF PROCESS	rk)	
James E. Til	ton et al			Complaint, summ	nons and Orde	er
NAME OF IN	DIVIDUAL, COMPANY, CORPO	DRATION. ETC	C. TO SERVE OR DE	SCRIPTION OF PROPERTY 1	O SEIZE OR CO	ONDEMN
SERVE Kurt L. M	cGuyer, Pelican Bay State	Prison				
	treet or RFD, Apartment No., City,		Code)			
P.O. Box	7000, Crescent City, CA 95	531-7000				
END NOTICE OF SERVICE C	OPY TO REQUESTER AT NAM	E AND ADDRE	ESS BELOW	Number of process to be served with this Form 285		
	el Martinez, Jr. H-93376 ay State Prison			Number of parties to be served in this case	Z	— }
P.O. Box	7500 City. CA 95532			Check for service on U.S.A.	OF CO	
	OTHER INFORMATION THAT timated Times Avallable for Servi		IN EXPEDITING SE	RVICE (<u>Include Business and</u>	THE DISTRICT	
	hator requesting service of behalf	RSHAL O				
acknowledge receipt for the tota number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	1 Total Process District of Origin	District to Serve	Signature of Autho	rized USMS Deputy or Clerk		23/28
hereby certify and return that I on the individual, company, corp	have personally served, ha	ve legal evidence above on the on	te of service, A have	executed as shown in "Remark any, corporation, etc. shown at	ks", the process d	escribed ted below.
	at I am unable to locate the individ	lual, company, o	corporation, etc. name	d above (See remarks below)		
Name and title of individual serve	ed (if not shown above)			A person of su then residing it of abode	itable age and dis n defendant's usu	
Address (complete only different	than shown above)			Date	Time	
				Signature of U.S. M	Marshal or Deput	y
Service Fee Total Mileage including end		otal Charges	Advance Deposits	Amount owed to U.S. Mars (Amount of Refund*)		
REMARKS: 1/04/08-N 3/20/08-by let	Inia w/299 For	hemo				

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Page 8 of 18

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USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

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PLAINTIFF Juan Angel Martinez, Jr.	COURT CASE NUMBER C-07-4684 CRB(PR)
DEFENDANT	TYPE OF PROCESS
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SERVE E. Enos, Pelican Bay State Prison	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
P.O. Box 7000, Crescent City, CA 95531-7000	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214	Number of parties to be served in this case
P.O. Box 7500 Crescent City. CA 95532	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SEAL Telephone Numbers, and Estimated Times Available for Service):	RVICE (Include Business and Attermate Attresses VICE) PM 4: 06 PM 4: 06
MARIA LOO	TELEPHONE NUMBER DATE
DEFENDANT DEFENDANT	(415) 522-2000 1/18/08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NO	OT WRITE BELOW THIS LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) Total Process District of Origin Serve No. No.	Date Laborate
I hereby certify and return that I \(\sum \) have personally served, \(\sum \) have legal evidence of service have on the individual, company, corporation, etc., at the address shown above on the on the individual, company.	executed as shown in "Remarks", the process described any, corporation, etc. shown at the address inserted below.
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named	i above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time an
	Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges including endeavors) Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
REMARKS: 1/24/08- Minited w/ 299 mm 3/2008-by letter Receipt of Jummon	\$0.00
PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD	PRIOR EDITIONS MAY BE USE

NOTICE OF SERVICE
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Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.

Case 3:07-cy-04684-CRB Document 22-2 Filed 06/27/2008 Page 11 of 18 USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "lustructions for Service of Process by U.S. Marshal"

PLAINTIFF Juan Angel Martinez, Jr.	COURT CASE NUMBER C-07-4684 CRB(PR)	
DEFENDANT	TYPE OF PROCESS	
James E. Tilton et al	Complaint, summons and Order	
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR		EMN
SERVE J. Barneburg, Pelican Bay State Prison		
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
P.O. Box 7000, Crescent City, CA 95531-7000		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		
2.00.101.02.01.02.01.02.02.01.01.02.02.02.02.02.02.02.02.02.02.02.02.02.	Number of process to be served with this Form 285	
Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214	Number of parties to be served in this case	_
P.O. Box 7500 Crescent City. CA 95532	Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING		
All Telephone Numbers, and Estimated Times Available for Service): -	08 JAN 18 PM NORTHERN DIS OF CALIFOR	UNITED STATES M
signature of Attorney other Originator requesting service on behalf of: MARIA LOO	TELEPHONE NUMBER	12-
DEFENDANT	(415) 522-2000	芸
CDA CE PEL ON EOD LICE OF ILC MADCHAL ONLY DO		-
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO		
acknowledge receipt for the total number of process indicated. Sign only for USM 285 if more han one USM 285 is submitted) Total Process District of Origin Serve No. No. No.	uthorized USMS Deputy or Clerk Date	31
hereby certify and return that I \square have personally served, \square have legal evidence of service on the individual, company, corporation, etc., at the address shown above on the on the individual, co	have executed as shown in "Remarks", the process description pany, corporation, etc. shown at the address inserted b	ibed elow.
l hereby certify and return that I am unable to locate the individual, company, corporation, etc. na	amed above (See remarks below)	
Name and title of individual served (if not shown above)	A person of suitable age and discret then residing in defendant's usual plof abode	
Address (complete only different than shown above)	Date Time	□ a
	Signature of U.S. Marshal or Deputy	
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposition of the Charges Including endeavors)	Amount owed to U.S. Marshal* or (Amount of Refund*)	
REMARKS: 1/24/08- mailed w/29 form 3/2908- by letter Receipt of human	\$0.00	
PRINTS COPIES: 1. CLERK OF THE COURT	PRIOR EDITIONS MAY B	BE US

NOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ.

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

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U.S. Bepartment of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUMBER
Juan Angel Martinez, Jr.	C-07-4684 CRB(PR)
DEFENDANT	TYPE OF PROCESS
James E. Tilton et al	Complaint, summons and Order
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR D	ESCRIPTION OF PROPERTY TO SEIZE OR CONDE
SERVE C. Countess, Pelican Bay State Prison	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
P.O. Box 7000, Crescent City, CA 95531-7000	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214	Number of parties to be served in this case
P.O. Box 7500	Check for service
Crescent City. CA 95532	on U.S.A. GERVICE (Include Business and Allernate Addresses.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING S All Telephone Numbers, and Estimated Times Available for Service):	SERVICE (Include Business and Alternate Addresses. ALIFORNIA OR 14: 06
Signature of Attorney other Originator requesting service on behalf of:	TELEPHONE NUMBER DATE
MARIA LOO	(415) 522-2000 1/18/08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO N	OT WRITE BELOW THIS LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) Total Process District of Origin Serve No. No. No.	Date 1/23/
I hereby certify and return that I \square have personally served , \square have legal evidence of services have not the individual, company, corporation, etc., at the address shown above on the on the individual, company	ve executed as shown in "Remarks", the process describe pany, corporation, etc. shown at the address inserted belo
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. nam	ned above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time
	Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges including endeavors) Forwarding Fee Total Charges Advance Deposit.	s Amount owed to U.S. Marshal* or (Amount of Refund*)
8.50	\$0.00
3/20/08-MAILO W/299 From 3/20/08-by letter Legipt of Summ PRINTS COPIES: 1. CLERK OF THE COURT	PRIOR EDITIONS MAY BE U
2. USMS RECORD	. How bellions and be

3. NOTICE OF SERVICE 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,

if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

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USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Juan Angel Martinez, Jr. DEFENDANT James E. Tilton et al NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONTOUR D. Milligan, Pelican Bay State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. Box 7000, Crescent City, CA 95531-7000 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses)
James E. Tilton et al NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONTOUR D. Milligan, Pelican Bay State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. Box 7000, Crescent City, CA 95531-7000 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Check for service on U.S.A.
James E. Tilton et al Complaint, summons and Order NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONI D. Milligan, Pelican Bay State Prison ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. Box 7000, Crescent City, CA 95531-7000 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Check for service on U.S.A.
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONTENT OF ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. Box 7000, Crescent City, CA 95531-7000 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Check for service on U.S.A.
SERVE AT D. Milligan, Pelican Bay State Prison
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. Box 7000, Crescent City, CA 95531-7000 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Check for service on U.S.A.
P.O. Box 7000, Crescent City, CA 95531-7000 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Number of process to be served with this Form 285 Check for service on U.S.A.
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.
Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Number of parties to be served in this case Check for service on U.S.A.
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Pelican Bay State Prison C-7-214 P.O. Box 7500 Crescent City. CA 95532 Check for service on U.S.A.
P.O. Box 7500 Crescent City. CA 95532 Check for service on U.S.A.
Crescent City. CA 95532 on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses
All Telephone Numbers, and Estimated Times Available for Service):
→
Ór: 🖜
Signature of Attorney other Originator requestin MAR PABETANDE
☐ DEFENDANT (415) 522-2000 1/18/08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE
I acknowledge receipt for the total number of process indicated. Total Process District of Origin Serve District to Signature of Authorized USMS Deputy or Clerk Serve
(Sign only for USM 285 if more
than one USM 285 is submitted) No. No. No.
I hereby certify and return that I \(\subseteq \) have personally served, \(\subseteq \) have legal evidence of service \(\subseteq \), have executed as shown in "Remarks", the process described in the process of
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted to
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)
Non-Life Control of the Land of the Land
Name and title of individual served (if not snown above) A person of suitable age and discrete then residing in defendant's usual place.
of abode
Address (complete only different than shown above) Date Time
Signature of U.S. Marshal or Deputy
Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits Amount owed to U.S. Marshal* or (Amount of Refund*)
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits Amount owed to U.S. Marshal* or
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits Amount owed to U.S. Marshal* or
Service Fee Total Mileage Charges including endeavors) Total Mileage Charges Forwarding Fee Total Charges Advance Deposits (Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
Service Fee Total Mileage Charges including endeavors) Total Mileage Charges Forwarding Fee Total Charges Advance Deposits (Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
Service Fee Total Mileage Charges including endeavors) Total Mileage Charges including endeavors) Forwarding Fee Total Charges Advance Deposits (Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
Service Fee Total Mileage Charges including endeavors) Total Mileage Charges Forwarding Fee Total Charges Advance Deposits (Amount of Refund*) \$0.00

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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

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PLAINTIFF Juan Angel Martinez, Jr.	COURT CASE NUMBER C-07-4684 CRB(PR)
DEFENDANT	TYPE OF PROCESS
James E. Tilton et al	Complaint, summons and Order
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERV	
SERVE R. Estes, Pelican Bay State Prison	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
P.O. Box 7000, Crescent City, CA 95531-7000	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be
	served with this Form 285
Juan Angel Martinez, Jr. H-93376 Pelican Bay State Prison C-7-214	Number of parties to be served in this case
P.O. Box 7500 Crescent City. CA 95532	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDIAL Telephone Numbers, and Estimated Times Available for Service): Signature of Attorney other Originator requesting service on behalf of:	NITED STATES MAPS B JAN 18 PM LA B J
Signature of Attorney other Originator requesting service on behalf of: MARIA LOO DEFENDA	· Ω • \$
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY	DO NOT WRITE BELOW THIS LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) Total Process District of Origin Serve No	of Authorized USMS Deputy or Clerk Date 1/23/6
I hereby certify and return that I \square have personally served, \square have legal evidence of service on the individual, company, corporation, etc., at the address shown above on the on the individual	have executed as shown in "Remarks", the process described all, company, corporation, etc. shown at the address inserted below.
I hereby certify and return that I am unable to locate the individual, company, corporation,	etc. named above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time
	Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges including endeavors) Total Mileage Charges Forwarding Fee Total Charges Advance	Deposits Amount owed to U.S. Marshal* or (Amount of Refund*)
REMARKS: 1/24/08-Mailes W/299 Form 3/20/08-by lette, Receipt of Summer	\$0.00
PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD	PRIOR EDITIONS MAY BE US

3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT

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